

DO NOT USE THIS FORM TO REPORT CRIME CLASSIFICATION SERIAL NUMBERS OBTAINED FOR PROPERTY PREVIOUSLY REPORTED				GIVEN PROPERTY, ADDITIONAL STOLEN PROPERTY TO REPORT THE PRECEDING.										
<b>COMPLAINT - FOLLOW UP INFORMATIONAL</b> PD 313-081A (Rev. 4-89-31)				PAGE _____ OF _____ PAGE _____ Crime ASSAULT 1 Pct. 043 OCCB No. Complaint No. Date of This Report 2   12   01										
Date of Orig. Report	Date Assigned	Case No.	Unit Reporting	Pct.	OCCB No.	Complaint No.	Date of This Report							
2   12   01	2   12   01		Bx. Robbery Sqd.	043			2   12   01							
Complainant's Name - Last, First, M.I. XXXXXXXXXX P.S.N.Y.				Victim's Name - If Different										
Last Name, First, M.I.				Address, Include City, State, Zip										
Home Telephone		Business Telephone		Position / Relationship		Sex	Race	Date of Birth	Age					
Total No. of Perpetrators	Wanted	Arrested	Weapon	Describe Weapon (If firearm, give color, make, caliber, type, model, etc.) <input type="checkbox"/> Used <input type="checkbox"/> Possessed										
Wanted		Arrested	Last Name, First, M.I.	Address, Include City, State, Zip						Apt. No.	Res. Pct.			
<input type="checkbox"/>		<input type="checkbox"/>		Sex	Race	Date of Birth	Age	Height	Weight	Eye Color	Hair Color	Hair Length	Facial Hair	NYSID No.
<input type="checkbox"/> Eyeglasses <input type="checkbox"/> Sunglasses		Clothing Description												
Nickname, First Name, Alias		Scars, Marks, M.O., Etc.												
(Continue in "Details")														
Wanted		Arrested	Last Name, First, M.I.	Address, Include City, State, Zip						Apt. No.	Res. Pct.			
<input type="checkbox"/>		<input type="checkbox"/>		Sex	Race	Date of Birth	Age	Height	Weight	Eye Color	Hair Color	Hair Length	Facial Hair	NYSID No.
<input type="checkbox"/> Eyeglasses <input type="checkbox"/> Sunglasses		Clothing Description												
Nickname, First Name, Alias		Scars, Marks, M.O., Etc.												
(Continue in "Details")														
AREA WITHIN BOX FOR DETECTIVE / LATENT FINGERPRINT OFFICER ONLY. THIS BOX WILL BE UTILIZED BY INVESTIGATOR WHENEVER POSSIBLE AND MUST BE FULLY COMPLETED WHEN USING THIS FORM TO CLOSE A CASE "NO RESULTS."														
Comp. Interviewed		In Person	By Phone	Date	Time	Results: Same as Comp. Report - Different (Explain in Details) <input type="checkbox"/> <input type="checkbox"/>								
<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>	<input type="checkbox"/>											
Witness Interviewed		In Person	By Phone	Date	Time	Results: Same as Comp. Report - Different (Explain in Details) <input type="checkbox"/> <input type="checkbox"/>								
<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>	<input type="checkbox"/>											
Canvas Conducted		If Yes - Make Entry in Body Re Time, Date, Names, Addresses, Results				Crime Scene Visited		If Yes - Make Entry in Details Re: Time, Date, Evidence Obtained <input type="checkbox"/> Yes <input type="checkbox"/> No						
<input type="checkbox"/> Yes <input type="checkbox"/> No														
Complainant Viewed Photos		Results:												
<input type="checkbox"/> Yes <input type="checkbox"/> Refused <input type="checkbox"/> Future														
Witness Viewed Photos		Results:												
<input type="checkbox"/> Yes <input type="checkbox"/> Refused <input type="checkbox"/> Future														
Crime Scene Dusted		By (Enter Results in Details)				Crime Scene Photos		By (Enter Results in Details) <input type="checkbox"/> Yes <input type="checkbox"/> No						
<input type="checkbox"/> Yes <input type="checkbox"/> No														
If Closing Case "No Results," Check Appropriate Box and State Justification in Details: <input type="checkbox"/> C-1 Improper Referral <input type="checkbox"/> C-2 Inaccurate Facts <input type="checkbox"/> C-3 No Evidence / Can't ID <input type="checkbox"/> C-4 Uncooperative Complainant <input type="checkbox"/> C-5 "Leads" Exhausted														
DETAILS: <b>SUBJECT: INTERVIEW OF Mr. Sal Miro</b> <b>STATUS: Case Active</b>														
1. on 2   12   01 at approx. 1630 hrs i interviewed Mr. Sal Miro. Mr. Miro is employed at Parkchester Housing Development in the construction shop. Mr. Miro informed me that he knows security guard Anthony Manganiello who is also employed at Parkchester housing development. Mr. Miro states that in the past he had a conversation with Manganiello where in Manganiello told him that he owned a .22 caliber pistol. Miro further stated that he remembers hearing that the victim and Manganiello had a 'beef' or other disagreement, he does not know the basis for the disagreement.														
2. Mr. Miro can be reached at telephone number (718)239-2878. His address is 1610 Metropolitan Ave. Bx. NY apt.M-B.														
3. Case Active.														
<b>DEFENDANT'S EXHIBIT</b> <b>Z7</b>														
CASE #		DATE REVIEWED / CLOSED				12   12		IF ACTIVE, DATE OF NEXT REVIEW 2   2   08						
<input type="checkbox"/> ACTIVE <input type="checkbox"/> CLOSED														
REPORTING														

Exhibit B